



Please type a plus sign (+) inside this box →

pbs

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Modified 9-98

FILE COPY

PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Receipt

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

BOX: Office of Initial Patent Examination

Express Mail Receipt No.

Application Number	09/524,971
Filing Date	March 14, 2000
First Named Inventor	David B. Parlor
Examiner Name	Unknown
Group Art Unit	2766
Issue Fee Batch No.	
Attorney Docket Number	X-607 US 2700

RECEIVED
JUL 12 2000
U.S. PATENT AND TRADEMARK OFFICE

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (with Recordation Cover Sheet)	<input type="checkbox"/> After Allowance Communication to
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Declaration / Oath	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> <input type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> <input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Status Letter
<input type="checkbox"/> <input type="checkbox"/> Affidavit(s)/declaration(s)	<input type="checkbox"/> Petition -	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Request for Corrected Filing Receipt and Red-Lined Copy of Filing Receipt
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> PTO-1449(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	XILINX, INC. Edel M. Young	Reg. Number 32,451
Signature		
Date	June 2, 2000	Charge any additional fees required/credit any overpayment to our Deposit Account Number: 24-0040

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D. C. 20231 on this date: June 2, 2000

Typed or Printed Name	Pat Slaback		
Signature			
	Date	June 2, 2000	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PATENT

IN THE UNITED STATES PATENT OFFICE

Applicants: David B. Parlour, Richard S. Ballantyne
Assignee: Xilinx, Inc.
Title: "Intellectual Property Protection in a
Programmable Logic Device"
Serial No.: 09/524,971 File Date: 03-14-00
Examiner: Unknown Art Unit: 2766
Docket No.: **X-607 US**

COMMISSIONER FOR PATENTS
Office of Initial Patent Examination's
Customer Service Center
Washington, D. C. 20231

RECEIVED

JUL 12 2000

TECH CENTER 2700

REQUEST FOR CORRECTED FILING RECEIPT

Dear Sir:

Applicants request a corrected Filing Receipt in the above identified patent application, which includes the following change:

Please correct the last word in the title of the above-referenced application to read -Device--.

A red-lined copy of the Filing Receipt is enclosed for clarification.

No fee is due with this communication.

The Commissioner is hereby authorized to charge any additional fees, or credit any overpayment which may be required to Deposit Account No. 24-0040.

Respectfully submitted,

Edel M Young
Edel M. Young
Agent for Applicants
Reg. No. 32,451
408-879-4969

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D. C. 20231, on June 2, 2000.

Pat Slaback
Name

Pat Slaback
Signature

DOCKETED
MAY 23 2000

FILING RECEIPT



OC00000005118630

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/524,971	03/14/2000	2766	990	X-607 US	5	5	RECEIVED

Edel M Young
Xilinx Inc
2100 Logic Drive
San Jose, CA 95124



JUL 12 2000
TECH CENTER 2700
5

Date Mailed: 05/16/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

David B Parlour, Pittsburg, PA ;
Richard S Ballantyne, Stittsville, CANADA;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 05/15/2000

Title

Intellectual property protection in a programmable logic device
device

Preliminary Class

713

Data entry by : JACKSON, MINNIE

Team : OIPE

Date: 05/16/2000

RECEIVED
MAY 23 2000
INTELL. PROP. DEPT.
XILINX, INC.





Bib Data-Sheet



**UNITED STATES DEPARTMENT OF
COMMERCE**
Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

FILE COPY

SERIAL NUMBER 09/524,971	FILING DATE 03/14/2000 RULE -	CLASS 713	GROUP ART UNIT 2766	ATTORNEY DOCKET NO. X-607 US
-----------------------------	-------------------------------------	--------------	------------------------	------------------------------------

APPLICANTS

David B Parlour, Pittsburgh, PA ;
Richard S Ballantyne, Stittsville, CANADA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE****GRANTED ** 05/15/2000**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 5	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

Edel M Young
Xilinx Inc
2100 Logic Drive
San Jose , CA 95124

24309

TITLE

Intellectual property protection in a programmable logic device

FILING FEE RECEIVED 990	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------	---	---